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MCANDREWS HELD & MALLOY, LTD 500 WEST MADISON STREET SUITE 3400 CHICAGO, IL 60661						Certificate of Mailing or Transmission electronical I hereby certify that this Fee(s) Transmittal is being denoted with the Kinder States Box Novice with such that the property of the state of the Control of the Cont					
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						June 15	, 20	107'//	(Date)	
APPLICATION NO.	CATION NO. FILING DATE			FIRST NAMED INVENTOR		<u> </u>	ATTORNEY DOCKET NO.		CONFIRMATION NO.		
10/774,037	10/774,037 02/06/2004		Maneesh Go					15424US01	7745		
TITLE OF INVENTION:	METHOD AND SYST	EM FOR	AN INTEGRA					OTV RECEIVER			
APPLN. TYPE	SMALL ENTITY	ISSU	E FEE DUE	PUBLICATION FEE D	UE	PREV. PAID ISSUE	FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO		\$1400	\$300		\$0		\$1700	06/18/2007		
EXAMINER		ART UNIT		CLASS-SUBCLASS							
LEE, MICHAEL		2622		348-453000							
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 1 McAndrews, Held & Malloy, Ltd.							
3. ASSIGNEE NAME AN PLEASE NOTE: Unle recordation as set forth (A) NAME OF ASSIG	ss an assignee is identi in 37 CFR 3.11. Comp			•	he pa g an a	tent. If an assignessignment.			ocument has been file	d for	
Broadcom Corporation				Irvine,	Ca	lifornia					
Please check the appropris	inted on the patent):		Individual 💆 Co	orporati	on or other private gre	oup entity Govern	ment				
4a. The following fec(s) are submitted:				b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 13-0017 (enclose an extra copy of this form).							
5. Change in Entity State a. Applicant claims			CFR 1.27.	☐ b. Applicant is no	olong	er claiming SMAI	LL ENT	TTY status. See 37 C	FR 1.27(g)(2).		
NOTE: The Issue Fee and interest as shown by the re										rty in	
Authorized Signature	Cofe		T DU					5, 2007			
Typed or printed name			Registration N	Io	51,458						
This collection of informa an application. Confidenti submitting the completed this form and/or suggestic Box 1450, Alexandria, Vi Alexandria, Virginia 2231 Under the Paperwork Red	ality is governed by 35 application form to the ons for reducing this burginia 22313-1450. DC 3-1450.	U.S.C. 1 USPTO. rden, sho NOT SI	22 and 37 CFR Time will vary uld be sent to the END FEES OR (1.14. This collection i depending upon the e Chief Information C COMPLETED FORM	is esti indivi Ifficei IS TO	mated to take 12 r dual case. Any co r, U.S. Patent and THIS ADDRESS	minutes omment Traden S. SENI	to complete, including on the amount of the same of the same of the same of the commissioner of the commis	ng gathering, preparing me you require to com artment of Commerce, for Patents, P.O. Box	cess);, and iplete, P.O. 1450,	

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